PTO/SB/06 (08-01)

Approved for use through 7/31/2006. OMB 0651-0032

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875										Appli	Application or Pocket Number 2		
CLAIMS AS FILED PART ((Column 1) (Column 2)								SMALL	. ENTITY	OR		ER THAN LL ENTITY	
_	FOR	NL	NUMBER FILED		NUMBER EXTRA			RATE	FEE	7	RATE	555	
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	TAL CLAIMS CFR 1.16(c))		minus 20 = •					x s =	1	7		\$	
	DEPENDENT CLA CFR 1.16(b))	AIMS	minus '3 ≃		•		1	x \$_ =		OR	× \$=		
ML	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))									OR	X \$=		
f the difference in column 1 is less than zero, enter "0" in column 2.							ı	TOTAL	 	OR	+ \$=		
CLAIMS AS AMENDED - PART II								/ /	Ĺ	J OR	TOTAL	l	
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	1 , ,	(Column 1)		(Colum		(Column 3)	1/1	SMALL	ENTITY	9 R	· SMALL	R THAN ENTITY	
AMENDMENT	1/2/6	REMAINING AFTER AMENDMEN	- 1	NUMB PREVIO	UMBER VIOUSLY VID-FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	1	RATE	ADDI- TIONAL	
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	Independent (37 CFR 1.16(b))	13	Minus] " 3	>	= /		x s =	/	OR	x \$ =	/	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1. (6(d))							+5 = /	/	OR			
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AMENDMENT B		REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
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A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						T	+ 5 =	,	OR OR			
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		(Column 1)		(Column	1 2)	(Column 3)				OK	ADD'L FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOUS PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
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	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						Г	- \$ =		OR OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR L	TOTAL ADD'L FEE		
-	If the "Highest N	lumber Previous lumber Previous lumber Previously Imber Previously	ly Paid For" v Paid For"	IN THIS SPA	ACE is	less than 20, er	nter '	•					

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 **CLAIMS AS FILED - PART I SMALL ENTITY** OTHER THAN (Column 2) TYPE [OR SMALL ENTITY (Column 1) **TOTAL CLAIMS** 13 RATE FEE RATE FEE BASIC FEE BASIC FEE 385.00 770.00 **FOR** NUMBER EXTRA NUMBER FILED OR TOTAL CHARGEABLE CLAIMS minus 20= X\$ 9= X\$18= OR v INDEPENDENT CLAIMS minus 3 = X43 =X86= OR MULTIPLE DEPENDENT CLAIM PRESENT +145= +290= OR * If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL TOTAL OR **CLAIMS AS AMENDED - PART II OTHER THAN** SMALL ENTITY SMALL ENTITY OR (Column 1) (Column 3) (Column 2) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT TIONAL **TIONAL** RATE RATE AMENDMENT **AFTER PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR Total Minus X\$18= ** X\$ 9= OR Minus Independent X43= X86= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +290= +145= OR TOTAL OR ADDIT. FEE ADDIT. FEE (Column 2) (Column 3) (Column 1) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT TIONAL TIONAL RATE RATE AMENDMENT **PREVIOUSLY** AFTER **EXTRA** FEE FEE **AMENDMENT** PAID FOR Total Minus X\$ 9= X\$18= OR Independent Minus X86= X43= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +290= +145= OR TOTAL OR ADDIT. FEE ADDIT. FEE (Column 3) (Column 1) (Column 2) CLAIMS HIGHEST ADDI-ADDI-ပ REMAINING NUMBER PRESENT TIONAL RATE TIONAL RATE **AMENDMENT** AFTER **PREVIOUSLY EXTRA AMENDMENT** PAID FOR FEE FEE Total Minus ** X\$ 9= X\$18= OR Independent Minus X43= X86= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +290= ÷145= OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

OR

TOTAL

ADDIT. FEE

TOTAL

ADDIT. FEE

Application or Docket Number

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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